



## Request For Voter Registration Cancellation

I hereby request my voter registration to be canceled in  
Logan County, Illinois

Name: \_\_\_\_\_

Logan County street address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please mail completed form to the Logan County Clerk's Office at

601 Broadway St., Room 20, Lincoln, IL 62656

[www.logancountyil.gov](http://www.logancountyil.gov)

If you have any questions, please call the Logan County Clerk's Office  
at (217) 732-4148 or email us at [elections@logancountyil.gov](mailto:elections@logancountyil.gov).